

AN OVERVIEW OF PRAMEHA WITH SPECIAL REFERENCE TO ITS NIDANAPANCHAKA

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ABSTRACT

Ayurveda strongly emphasize on Preventive and Promotive aspects of health rather than curative. *Acharya Charaka* has stated that diagnosis is very important before preceding treatment. *Ayurveda* has 2 basic ways of diagnosing i.e. *Roga Pariksha* and *Rogi Pariksha* which refer to Examination of disease and Examination of Patient. Among them *Rogapariksha* gives us the detailed knowledge about a disease starting from the etiology aspect to the manifestation of disease. The five components of *Rogapariksha* are termed as *Nidana Panchak*. These play an important role in playing the treatment of all disease. *Prameha (Diabetes)* is one of the most common Non-communicable diseases (NCD's) and Diabetes is the fourth leading cause of global death by disease. It appears to be a global epidemic due to present era of Stress and Strain due to Competitive life Style and a change in dietary habits. The prevalence of diabetes is increasing rapidly day by day. India has become the Diabetic capital of the world. Globally it affects over 311 million people suffer from *Diabetes Mellitus*. It is estimated that global prevalence would exceed 470 million by 2030. Diabetes has long term potential effects on almost all system of body. It leads to various *Complications* at micro and Macro Vascular level. In the present review article *Nidanapanchakas* been explained. *Archaya Susruta* has emphasized as "*Sanshipta Kriya Yogo Nidana Parivarganam*", by understanding the *Nidana Panchaka* with in depth and understanding *Samprapti* helps in planning specific preventive Measures and Management. The detail of *Nidana Panchak* of Diabetes is explained in the paper.

Keywords: Diabetes, *Prameha*, Non-communicable diseases, *Stress*, *Nidana Panchaka*.

INTRODUCTION

Ayurveda is recognized as the foremost science of life and has the holistic approach for the maintenance of health and well being. The basic concept of Ayurveda about the healthy person is to maintain the equilibrium of *Sharirika* and *MansikaDosha*. Keeping in view the holistic approach of *Ayurveda*, it may be concluded that health (Homeostatic / physiological atmosphere) can be achieved only by maintaining the equilibrium in both *Sharirika* (*Vata, Pitta, Kapha*) and *MansikaDosha* (*Satva, Raja, Tama*)¹ and *AcharyaSusruta* also emphasized that “*SanshiptaKriyaYogoNidanaParivarganam*”, that is in short treatment is just the exemption of *Nidana* i.e causative factors². For the proper Diagnosis of Disease, History of Patient, Complaints and Detailed Examination of Patient etc. are milestones³ and are termed *RogaPariksha*. *NidanaPanchak* includes five components i.e *Nidana* (Etiology), *Poorvaroop* (Prodromal signs and symptoms), *Rupa* (Actual signs and symptoms), *Upshaya* (Trial and Error method of treatment) and *Samprapti* (Pathogenesis)⁴. *NidanaPanchak* are subjective as well as objective tools applied to understand the disease. *KaryaKaranaSidharanta* is also of the fundamental principle of Ayurveda. According to the “*Karya Karana Sidharanta*” *Karaya* means the production of disease is not possible without *Karana* i.e *Nidana* or *Hetu*. Ultimately the aim of the physician is to cure as well as to prevent the disease. Moreover, the knowledge of *Nidanapanchak* is important for prevention and treatment. *Diabetes* (*Prameha*) is one of the most common Non-communicable diseases (NCD's). It is the need

of time to review the ancient systems of medicine in order to apply measure prevalent in these systems in preventing the coming epidemic of lifestyle disorders which are preventable with changes in diet, lifestyle, and environment. *Prameha* is attracting Global importance, as it is rocking the World as Non infectious epidemic/pandemic. It is often referred to as a ‘Silent Killer’. *Prameha* is formed from two sub words. i.e ‘*Pra*’ and ‘*Meha*’ the word ‘*mih*’ stands for watering, wetting and *Upsargapra* suggest Excessive Frequency of Urine⁵. According to above etymology, meaning of word ‘*Prameha*’ can be stated as “The disease in which quantity as well as frequency of micturition increases is known as *Prameha*”⁶. *Prameha* and its types are widely explained in *Bhrihatrayi* and *Laghutrayi*, *AcharyaCharaka* has given elaborate description of *Prameha* in *Sutrasthana*, *Nidansthana* and *ChikitsaSthana*⁷. *AcharyaSushruta* has explained some different types of *Prameha* like *Surameha*, *Lavanameha* and *Amlameha*. He has mentioned treatment of *Madhumeha* and *PramehaPidika* in separate chapters and also mentioned choice of drug for each type. Description of *Prameha* and its types from various *Ayurvedic* classics helps us to know the disease thoroughly ‘*Madhumeha*’ is mentioned in ‘*Ashtomahagada*’ by *AcharyaSushruta*⁸.

NIDANA

The term *Nidana* means the factors responsible for producing disease i.e Etiological factors⁹. For diagnosis one should know the exact cause of manifestation as in case of some like *Vatarakta* and *Kustha*

having a few same *Poorvaroopa*, can be diagnosed by taking the help of *Nidana*. The Etiological factors of Diabetes can be divided into following two groups:

1. Dietary factors-

Payamsi (Use of milk and milk preparation), *Dadheeni* (excessive use of curd), *Gramya-oudakaanupamamsa* (flesh of animals of domestic aquatic and marshy places), *Navaannapanam* (new grains), *Guda-vaikruti* (jaggery and its derivatives), *Ikshurasa* (Sugar cane), *Madhurahara* (Sweet substances), *Pishtaahara* (carbohydrate rich food), *Adyashana* (repeated food intake), *Adhikashana* (Excess food intake), *Ahitashana* (Unwholesome diet), *Samashana* (Improper diet). *Havisha*, a special rich food made from milk, sugar and rice¹⁰.

2. Life style factors:

Asayasukham (Habituation to sitting on soft cushions for long periods) and *Swapana-sukham/Atinidra* (prolonged sleeping) are suggested as key predisposing factors for diabetes. Other causes include *Sahaja* (Inherited factor), *Bhaya*(Fear), *DeergaRoga* (Long standing illness), *Alasya* (Sedentary life), *Kaphakrut cha sarvam* (All foods and lifestyle activities which increases *Kapha*)¹¹.

3. Beejadoshaja :

Hereditary predisposition for the *Prameha*¹².

PURVAROOPA:

Prodromal symptom/*Purvarupa* symptoms are the symptoms which are manifested prior to the full manifestation of the disease. *Purvaroopa* are the symptoms which are produced during the *Sthanasamaraya* by vitiated *Doshas* i.e when *Samprapti* has not been completed and disease has not been

manifested¹⁰.The various prodromal symptoms of diabetes given are:

Karapadaosuptadaha (numbness and burning sensation in hand and feet), *Paridahosuptatachaangushu* (burning sensation and numbness in various organs of the body), *MadurjyaAmayashya* (sweet taste in the mouth), *Madura Suklamutrata* (sweet and white urination), *SadpadaPippilicaSariraMutraSaranam* (attraction of insects and ants on the body and urine, dryness in mouth, palate and throat), *Pipasa* (thirst) and *Tandra* (drowsiness), *khewdaangagandha* (excessive sweating and foul smelling of the body), *Shithilaanga* (looseness of the body), *Aalashya* (laziness), *Malongkaye* (dirtiness in the body), *TaugalajihvaDanta Mule Mala Utpada* (excessive excreta in palate, tongue and teeth etc.), *JathelataBhabeKeshashu* (matting of the hair), *Kasha nakhaativridhi* (excessive growth of hair and nail), *Mutradoshan* (appearance of abnormalities in urine)¹³.

TYPES

1. According toDoshikPredominance¹⁴

- **KaphajPrameha** (Further divided into 10 types)
- **PittajPrameh** (Further divided into 6 types)
- **VatajPrameh** (Further divided into 4 types)

2. According to Causes¹⁵

- **SahajaPrameha**: which is genetically transmitted disorder?
- **ApathyannimitajaPrameha**: which arises as a result of improper diet and life styles.

3. According to body type¹⁶

- **Sthoola** (Obese)

- **Krusha** (Emaciated and weak)
- 4. According to Samprapti¹⁷**
 - **Avaranjanya:** In *Avaranjanyamadhumeha*, *Kaphavardhakanidanasevana* leads to *vataavarana*, which in turn leads to *OjasKarshana* which comes to the basti & patient passes *Madhur*, *Kashaya*, *Ruksha Mutra*, which is said to be *Madhumeha*.
 - **Dhatukshayajanya:** In *Dhatukshayajanya*, due to *vatavardhaknidan*, *vataprakopa* occurs & the *madhuratwa* of *Oja* is displaced by *Kashaya rasa* & it is brought to the basti leading to *MadhuvatMutratyaga*, leading to *Madhumeha*.
- 5. According to Management purpose¹⁸**
 - **Apatarpanauthaja-** describing the lean Diabetic. Requires *Santarpanchikitsa* (restorative) Management.
 - **Santarpanuthaja-** relating the obese diabetic. Requires *Aptarpanchikitsa* (fat reducing) Management.
- 6. According to Prognostic Classification¹⁹**
 - **Sadhya:** Curable and are diagnosed at very early onset of disease and those who are mainly *Sthoola* and the origin of their disease in *Apathyaja*.
 - **Yapya:** Yapya (palliable) helps control the disease with treatment.
 - **Asadhya:** *Sahaja* patients suffering from this variety are *Krishha* (lean).

RUPA

The complete manifestation of disease with prominent clinical features is termed as *Rupa*²⁰. These are prominent diagnostic tools of a disease. *Gayadasa*, in his commentary on *SushrutSamhita* quoted that in *Prameha* all

'*PurvaRupa*', get converted into '*Rupa*' of this disease²¹. This is nature of disease i.e. *VyadhiPrabhava*, from above it can be said that all '*PurvaRupa*' discussed previously considered as *Rupa* of the *Prameha*. *RupaofPrameha* are mentioned as follows. *Prabutamutra* (Polyuria), *Avila mutra* (Appearance of abnormalities in Urine), *Sharirgoaravam* (Heaviness in the body), *Vibandha* (Constipation), *Sharirjarta* (Stiffness in body), *Kasaya*, *madhura*, *Rukshamutra* (Astringent and Sweet urination), *Shvetaghanmutra* (White and Turbid urination), *MukhaMadurya* (Sweet taste in the Mouth). In children there is *Akasmاتمutrānigaman* (Bed wetting)²².

UPDRAVA:

Upadrava are the complications which occur along with progression of Disease. If proper Treatment and care is not taken Diabetes leads to a lot of complications. *AcharyaCharaka*, *Acharya Sushruta* and *Acharya Vaghbhatta* has given vibrant description about the complications of diabetes. *AcharyaCharaka* mentioned *SamanyaUpadrava* related to *Prameha*. But *Sushruta* and *Vaghbhatta* has mentioned according to *Doshic* predominance. ***SamanyaUpadrava* (General complications)** *Trishna* (Thirst), *Atisar* (diarrhea), *Daha* (burning sensation), *Daurbalya* (General weakness), *Arochaka* (Indigestion), *MamsaPidika* (Boils) *Vidradhi*. *Acharya Charaka* mentioned that occurrence of these complication is due to long term *Anubandha* of *Prameha Vyadhi*²³.

***VisheshUpadrava* (Specific complication)**

In *NidanaSthana* of *Sushruta* and *Vagabhata* specific complication of *Prameha* are explained as per the predominance of *Dosha*.

KaphajaMeha: *MakshikaSarpanam* (attraction of flies towards the body), *Alasya* (laziness), *Pratishyaya*, (rhinitis) *Shaithilya* (lassitude), *Arochaka* (ingestion), *Avipaka*, *Kaphapraseka* (excess salivation), *Chhardi* (vomiting), *Kasa* (cough) and *Shwasa*²⁴.

PittajaMeha: *Vrushana–Avadarana* (tearing pain in the scrotum), *Basti–Medhratoda* (Pain in urinary bladder and penis), *Hridshula* (Angina), *Amlika*, *Jvara*, *Atisara* (Diarrhea), *Daha* (Burning sensation), *Murchha* (Syncope), *Pipasa* (Thirst), *Nidranasha* (Insomnia), *Panduroga* (Anemia), *Vidbhed*²⁵.

VatajaPrameha: *Hridgraha* (Cardiac arrest), *Anidra* (Insomnia), *Stambha* (Stiffness), *Kamp* (Trembling), *Shula* (pain,) *Badhapurishatvam* (Constipation), *Shosha* (Muscle wasting), *Kasa* (Cough) and *Shwasa* (Dyspnea)²⁶.

PAREEKSHA: *MakshikaAkrant:* Attraction of *Makshika* (Flies) towards urine and Excretion of *Shweta Varna* and *Ghana* (Turboid) *Mutrata*²⁷.

DIFFERENTIAL DIAGNOSIS: *Acharya Charaka* explained differential diagnosis of *Prameha* with *RaktaPitta*. He explains that, if *Haridra* and *RudhiraMutraPravrutti* is not found with premonitory symptoms of *Madhumeha*. We can't say it *Prameha*, but it can be diagnosed as *Rakta–Pitta*²⁸.

UPSHAYA ANUPSHAYA

A judicious application of *Ausdha*, *Aana* and *vihara*, prescribed jointly or severally either antagonistic to the cause of disease, to the disease itself or to both, the cause and the disease, or similar to the cause of the disease,

to the disease or to both, the cause and the disease constitute *Upshaya* when it produce relief in the symptoms and *Anupshaya* when it aggravates the symptoms. It is a trial and error treatment²⁹.

Pathya:-

Prameha specific *Pathya* include both dietary and life style modifications which are to be practiced to manage the disease in a controlled manner and to prevent its complications. In dietary *Pathya*, diet rich in fiber content such as *Tiktashaka*, unsaturated oils (*Sarshapa oil*, *Atasi oil*), none refined grains/whole grains such as *Yava* (barley), *Trina dhanya*, less sweet content (low glycemic index) food articles are recommended for dietary *Prameha*³⁰.

Cereals – *Yava*, *Godhuma*, *Shyamaka*, *Kodrava*, *Bajra*.

Pulses – *Chanaka*, *Adhaki*, *Mugdha*, *Kulatha*.

Vegetables – *Nimb*, *Sarshapa*, *Methika*, *Karvellaka*, *Patola*.

Fruits – *Jambu*, *Talaphala*, *Kapitha*, *Tinduka*, *Dadima*, *Amalaki*.

Other – *Laja*, *Maricha*, *Hingu*, *Saindhav*, *Haridra*, *Ardraka*.

Life style modifications include regular exercise to maintain ideal weight. As mentioned in the benefits of *vyayama* (Exercise) *Agnivridhhi* (Improves digestion), *Sthaurya* (Improves muscle tonicity), *Dosha-kshaya* (Improves lipid profile and hyperglycemia) Beside Regular exercises, manual labor and long distance walking as mentioned by *Acharya Susruta* walking of 100 yojanin 100 days i.e 1 yojan per day, *Vyayama*, *Niyuddha* (Fighting), *Kreedha*

(Games), *Gajacharya* (Ride on elephant), *Turagacharya* (Ride on horse), *Rathacharya* (Cart riding), *Padacharya* (Walking)etc³¹.

Apathya:-

Practice of faulty dietary habits like Over eating (*Atiashana*), Untimely eating (*Vishamashana*) etc, not following the *Dinacharya* and *Sadavritta* leading to the states of anger, lust, grief, sorrow etc. All these practices disturb the physical and mental *Dosha* and hence lead to the diseased state. A *pathya* for the *Prameha* are just the opposite of the *Pathya* mentioned in the texts

Ahara: Excess Consumption of Water, Milk, Ghee, Oil, Curd, Sugar, Rice Preparations, *AnupaGramya*, *AudakaMamsa*, *Pishtanna*, *Navanna*.

Vihara: *Eksthana Asana* (Sedentary life style), *Atinidra* (Excessive sleep), *Divaswapna* (Day sleep), *Avyayam*, *Dhumapana* (Smoking), *Sweda*, *Mutravegadharana* (To urge for urination)³².

SADHYA ASADHYATA:

1) **Sadhya**:-*KaphajaPrameha* is *SadhyaPrameha* etiological factors are same as that of *Dosha-Dushya* and have same qualities and same seat. Treatment is same for both the *Dosha* and *Dushya*, i.e."Samakriyatvata' hence, *KaphajaPrameha* is *Sadhya* (curable)³³.

2) **Yapya** :-*PittajaPrameha* is palliable. It needs continuous treatment. As treatment stopped disease again gets provoked. Because of opposite treatment measures we have profound here³⁴.

3) **Asadhya** (incurable) Because of involvement of vital *Dhatu* like *Majja* and *Oja*, *VatajaPrameha* is incurable. Here drug

cannot recover the disease because of fast derangement of *Dhatu*³⁵.

SAMPRAPTI:

Entire process of manifestation of disease is called *Samprapti*³⁶.

Charaka has mentioned *SamanyaSamprapti* in *Chikitsa Sthana*. Because of over indulgence of etiological factors, *KaphaDosha*, with *Meda*, *Mamsa* and *Kleda* get vitiated and it results into formation of metabolic waste which conducted towards *Basti* which results in *Prameha*. *Charaka* has mentioned *Samprapti* of *Prameha* according to types in *Nidanasthana*. *KaphakaraNidanaSevana* Provokes *Kapha*. Provoked *Kapha* leading to increase in the quantities of *Kapha* in the body and spreads through whole body speedily, because of *Sharirshaiithilyakapha* get mixed with excess *Meda* which is *Abaddha* and similar characters with *Kapha*. These excess *Kapha* and *Meda* get combined with *Mamsa* which results in *Mamsapidika*. On other side excess *Kleda* gets converted in to *Mutra*. Thus *Kapha* along with *Meda*, *Kleda* covers opening of *MutravahaStrotasa* which results in to *Prameha*³⁷.

DISCUSSION

Ayurvedic science, a boon in today's man life, describes *Swasthaparayanata*, which means maintenance of health in the one hand and treatment of disease on the other. It has been described in *Ayurveda* that. It is not rational treatment where the medicine modifies one Disease; on the other hand it provokes new complications. So here, we are putting our step forward to find safe and effective methods. As *AcharyaCharaka* mentioned there may not be

the Nomenclature of all the disease in text but such diseases can be managed on the basis of *Dosha* concern³⁸ and it can be revealed by *NidanaPanchak* i.e *Nidana*, *Purvaroopa*, *Roopa*, *Upshaya*, *Samprapti* are the basic tool for the diagnosis. As *Prameha* is the disease caused by the over nutrition. Over nutrition can be resultant of both by diet as well as by other life style activities such as sedentary life style. Over nutrition is the factor which over nourishes the body, leading to increase in the quantities of *Kaphain* the body. Faulty dietary habits and other *Nidana* mentioned aggravating the *Kaphacan* give rise to *Prameha*, but to initiate a *vyadhi* in the body there must be involvement of *Vata* also because it is the only force responsible for physio-biochemical activities in the body. In *Prameha* there is in co-ordination of function of the *Agni/ AharaParimanakarabhava*, overeating leading to *TridoshaPrakopa*. The impaired *Agni*, both at the level of *Jatharagni* (GI level) and at *Dhatvagni* level (tissue level) is disturbed leading to the increase of *Amadosha* in terms of hyperglycemia, hypercholesterolemia, hypertriglyceridemia, high levels of LDL and other parameters of impaired lipid profile. Increase in these parameters are reflected in the body through increased weight, waist to hip ratio (WHR), early fatigue, as symptoms of obesity and *PrabhutaMutrata* (increased micturition), *Avila Mutrata* (turbid urine),and other symptoms of *Prameha*. *Prameha* can be prevented if intervention in the form of *PathyaAhara* and *Vihara* is applied in early stages, either pre diabetes, or healthy state. For the high risk individuals, dietary and lifestyle

plans should be made in accordance with the day to day requirement of an individual. *Ayurveda* suggests increased intake of fiber rich green vegetables and cereals *Patola*, *Tanduleyakam*, *Yava* etc.³⁶and are also recommended to diabetics by modern researchers too as complex carbohydrates like cereals, whole grains and vegetables are recommended at least to 50% of diabetic food because Simple carbohydrates are broken down easily and increases blood glucose levels fast. Hence, simple sugars like table sugar, honey, candy, jam, cakes, and pastries etc. are contraindicated. *PathyaAhara* and *Vihara* in daily routine, maintaining physical wellbeing, mental tranquility and sanctity are equally important.

CONCLUSION

It can be concluded that the *NidanaPanchaka* is a process or sequential way of diagnosing a disease at various stages. The equilibrium state of *Dhatu*s is not disturbed nor is the imbalance state brought to normalcy without some causative factors, that cause determines the equilibrium or imbalance state of *Dhatu*. Proper knowledge of the *NidanaPanchak* helps us for early diagnosis of the disease and also helps in differential diagnosis. In short, *Nidana* is to be avoid for the treatment, *Purvaroopa* helps in to diagnose at a very early phase, *Roopa* is an important tool indicating the stage, severity, type of disease, *Upashaya* plays an important role for treatment as well as differential diagnose and *Samprapti* helps to break the pathogenesis, accurately according to the *DoshaDushyaSamurchana* and to stop the

progress of disease and to reverse the disease. Hence after gaining the knowledge of *Nidanapanchak* helps physician to get proper path for treating the disease. So along with drug interventions, emphasis must be given to the high risk factors i.e dietary and lifestyle modifications, socioeconomic, behavioral and nutritional issues and to promote a healthier lifestyle.

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